

RECEIVED  
CENTRAL FAX CENTER

001/014

MAR 16 2006

Atty. Dkt. No. 034536-0928

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Gregory D. PLOWMAN, et al.  
Title: DIAGNOSIS AND TREATMENT  
OF AUR1 AND/OR AUR2  
RELATED DISORDERS  
Appl. No.: 10/734,126  
Filing Date: 12/15/2003  
Examiner: Sean E. Aeder  
Art Unit: 1642

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>	
I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
<u>Amy D. Mason</u>	(Printed Name)
<u>Amy D. Mason</u>	(Signature)
<u>3-16-2006</u>	(Date of Deposit)

**AMENDMENT TRANSMITTAL**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [ ] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [ ] Assertion of Small Entity status is enclosed.
- [ X ] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate	Additional Claims Fee	
Total Claims:	10	-	20	=	0	x	\$50.00	=	\$0.00
Independent Claims:	2	-	3	=	0	x	\$200.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$360.00	=	\$0.00
CLAIMS FEE TOTAL									= \$0.00

WASH\_1585632.1

-1-

Atty. Dkt. No. 034536-0928

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$0.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$0.00

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

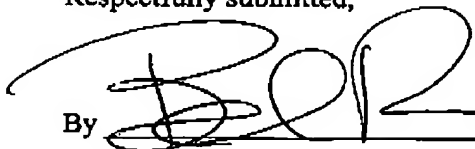
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

3/16/06

By



FOLEY & LARDNER LLP  
 Customer Number: 22428  
 Telephone: (202) 672-5475  
 Facsimile: (202) 672-5399

Beth A. Burrous  
 Attorney for Applicant  
 Registration No. 35,087

MAR 16 2006

Atty. Dkt. No. 034536-0928

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

**Applicant:** Gregory PLOWMAN et al.  
**Title:** DIAGNOSIS AND TREATMENT OF AUR1 AND/OR AUR2  
RELATED DISORDERS  
**Serial No.:** 10/734,126  
**Filing Date** 12/15/2003  
**Examiner:** Aeder, Sean E.  
**Art Unit:** 1642

**AMENDMENT AND RESPONSE UNDER 37 C.F.R. § 1.116**

Mail Stop AF  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

This is a response to the final Office Action mailed December 20, 2005 concerning the captioned application.

**Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this document.

**Remarks/Arguments** begin on page 4 of this document.

Please amend the application as follows.